510(k) Summary

K06 1976

SEP 27 2006

Date:	June 19, 2006
Submitter's Name:	Toshiba America Medical Systems, Inc.
Submitter's Address:	P.O. Box 2068, 2441 Michelle Drive, Tustin, CA 92781-2068
Submitter's Contact: (714)730-5000	Paul Biggins, Regulatory Affairs Specialist,
Establishment Registration Number:	2020563
Device Proprietary Name:	CKIS-004A Injector Synchronization Option
Common Name:	Scanner, Computed Tomography, X-Ray [Fed. Reg. No. 892.1750, Pro. Code: 90JAK]
Regulatory Class:	II (per 21 CFR 892.1750)
Performance Standard:	21 CFR Subchapter J, Federal Diagnostic X-ray Equipment Standard
Predicate Device(s):	Siemens Care Contrast CT; k043807 Medrad Stellant CT Injector; k033881
Reason For Submission	Modification of cleared device

Description of this Device:
The CKIS-004A will be added to the previously cleared TSX-101A Aquilion CT system. This addition requires hardware and software modifications to the existing device. Application of this option will facilitate contrast enhanced CT examinations by providing an interface between the CT system and the contrast injection device. This interface is based upon the protocol contained in the CIA-425 standard.

Summary of Intended Uses:
This device is designed to facilitate contrast enhanced CT examinations. This device employs no intended uses that are not in cleared devices already found in the marketplace.

K061976

Technological Characteristics:
This package is similar in uses and applications as those of the predicate devices. The main difference is in the method used to obtain the final results.

Safety and Effectiveness Concerns:
This device is designed and manufactured under the Quality System Regulations as outlined in 21 CFR § 820. All requirements of the Federal Diagnostic Equipment Standard, as outlined in 21 CFR § 1020.30 and 1020.33, that apply to this upgrade, will be met and reported via a supplement to the initial report for the predicate device. Additionally this system is in conformance with the applicable parts of the IEC 60601-1 {applicable portions}; IEC 60601-2-32, IEC 60601-2-44. - Medical Device Safety standards and CiA -425 communications standard..

Substantial Equivalence:
Siemens Care Contrast CT; k043807
Medrad Stellant CT Injector; k033881

DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration
9200 Corporate Blvd.
Rockville MD 20850

Toshiba American Medical Systems, Inc.
c/o Mr. Mark Job
Responsible Third Party Official
Regulatory Technology Services LLC
1394 25th Street, N.W.
BUFFALO MN 55313

SEP 27 2006

Re: K061976
Trade/Device Name: CKIS-004A Injector Synchronization Option
Regulation Number: 21 CFR §892.1750
Regulation Name: Computed tomography x-ray system
Product Code: JAK
Regulation Number: 21 CFR §892.1650
Regulation Name: Angiographic injector and syringe
Product Code: DXT
Regulatory Class: II
Dated: September 9, 2006
Received: September 12, 2006

Dear Mr. Job:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter:

21 CFR 876.xxx	(Gastroenterology/Renal/Urology	240-276-0115
21 CFR 884.xxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 894.xxx	(Radiology)	240-276-0120
Other		240-276-0100

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150
or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Nancy C Brogdon

Nancy C. Brogdon
Director, Division of Reproductive,
Abdominal, and Radiological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known): K061976

Device Name: CKIS-004A Injector Synchronization Option

Indications For Use:

X-ray imaging of whole body - Computerized Tomography
Including:
Axial
Volumetric (Helical)
CT Fluoroscopy

The CKIS-004A, Injector Synchronization Option is intended to facilitate contrast enhanced CT examinations by interfacing the CT system to a contrast injection system. When employed, the CKIS-004A will allow both the CT scan and the contrast bolus to occur by activation of either the CT or the injector. The communications between the devices is based upon the CiA-425 standard.

Prescription Use ✓ AND/OR Over-The-Counter Use _____
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Nancy C Brogdon

(Division Sign-Off)
Division of Reproductive, Abdominal,
and Radiological Devices
510(k) Number K061976